

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

RECEIVED

By Carol Day at 2:18 pm, Jun 26, 2014

STATE PUBLIC HEALTH LABORATORY ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT REPORT #7 Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file. ALCO SENSOR IV SN PRINTER SN DATE OF INSPECTION 094804 097.3584.334 06/23/2014 LOCATION OF INSTRUMENT (STREET AND CITY) TIME OF INSPECTION 201 W 2nd St, Sedalia MO, 65301 11:09 am CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument. DIGITAL READOUT (ALL ELEMENTS OPERATIONAL) TEMPERATURE OF ALCO SENSOR (10°C - 40°C) PRINTER WORKING PROPERLY TIME AND DATE DISPLAYING PROPERLY **BREATH ALCOHOL ACCURACY STANDARDS** SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE STANDARD SUPPLIER RepCo Marketing LOT # 13002 EXP. DATE 06/19/2015 SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0C SD2306 SIMULATOR SN SIMULATOR EXP DATE 10/17/2014 CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE TEST 1 .101 TEST 2 .100 TEST 3 🖛 .101 RFI DETECTOR OPERATING INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS) 0 REFUSALS 0 (0-.04)0 (.05 - .09)(.10 - .14)(.15 - .19)(OVER .19) List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary). Calibration Check Performed prior to maintenance. This instrument conforms to DOH Regulations

INSPECTING OFFICER		
SIGNATURE XXX		PRINT NAME Andrew Silvey
TYPE II PERMIT NUMBER/EXPIRATION DATE 230247	10/24/2015	TELEPHONE NUMBER (660) 826-8100
Return completed report to the:	Breath Alcohol Program, MO Department of Health ar	nd Senior Services, Southeast District Office

2875 James Boulevard Poplar Bluff, MO 63901

CERTIFICATE OF ANALYSIS

MANTIFACTUDED AND CUIDDUTED, D. C. N. L. C. N.
MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc. LOT NUMBER: 13002
EXPIRATION DATE: June 19, 2015 at 11:59 p.m.
RepCo Marketing, Inc. certifies the following:
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number
13002 of Alcohol Certified Solution for simulators. Random samples of said lo
number were analyzed by an independent laboratory utilizing a gas chromatograph
and found to contain gms/dl +/003 gms/dl wt/vol ethanol (95%
Confidence).
The alcohol and distilled water used in the solution were found to be free o
any interferring substance.
This solution will produce a vapor alcohol value of100 +/-3% gms/210I
Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator
(95% Confidence).
The date of manufacture for this lot number is June 20, 2013
The expiration date for this lot number is June 19, 2015 ar
11:59 p.m.
This document is a true representation of the original Certificate of Analysis.
Caril Com Dis
Cecil B. Garner, President RepCo Marketing, Inc.
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Form RM 02



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

ANDREW SILVEY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE10/24/2013	huns
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230247	Dal Vasterly
EXPIRES 10/24/2015	

MO 580-0771 (6-10)

LAB-4 (R6-10)



AS IU Serial no: 094804
Uersion no: 532B

TEST RICORD 00190

TEST RICORD 10190

Temp Date Time 210L

UOID: RFI
12 06/23/14 11:43

Subject Name

Operator Name, 1.D.

Location

Sobolic 10

Air Blank: 06/23/)4 11:40 .000 Calibration Check: 26 06/23/)4 11:40 .180 Subject I.D.
Subject I.D.

Subject I.D.

Support I.D. Temp Date Time 210L Subject Name TEST RECORD 00188 Operator Name, I.D. Schools

AS IV Serial no: 094804 Version no: 532B Air Blank: 06/23/14 11:39 .000 Calibration Check: 26 06/23/14 11:39 .101 Subject Name Temp Date Time 210L AS IV Serial no: 094804 Version no: 532B TEST RECORD 00187